



## Before you make an Assistive Technology referral

Have you already considered these?

OCPS AT Team

### Communication

(If you have any questions regarding a student's communication, please contact your Speech-Language Pathologist.)

- Do you provide choices in the classroom? ☐Yes ☐No
- Have you tried picture symbols? ☐Yes ☐No
- Have you used communication devices within the classroom routine?  
☐Yes, these devices: \_\_\_\_\_ ☐No
- Have you used sign language/gestures? ☐Yes ☐No
- Is there an established yes/no response? ☐Yes ☐No
- Have you consulted with your Speech-Language Pathologist? ☐Yes ☐No

### Environmental/Computer Access

(If you have questions regarding a student's device access or written output, contact the Occupational Therapist.)

- Have you found a motor movement that the student can do voluntarily?  
(ex. activate switch with hand or arm, purposeful head movement, etc.)  
☐Yes, describe \_\_\_\_\_ ☐No
- Have you provided any opportunities/experience with a switch? ☐Yes ☐No
- Have you provided any opportunities/experience with a mouse? ☐Yes ☐No

### Writing

- Has the student used any writing aids (pencil grips, slant board, lined paper?)  
☐Yes, describe \_\_\_\_\_ ☐No
- Can the student recognize/ locate letters on a keyboard? ☐Yes ☐No
- Has the student had a typing program or class? ☐Yes ☐No
- Have you consulted with your Occupational Therapist? ☐Yes ☐No

If the questions above have been addressed and concerns remain, then send a completed assistive technology screening request to the OCPS AT Team, 434 Tampa Ave. (407) 317-3504

(<http://teachers.ocps.net/atteam/>)